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## APPLICANTS

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*IV*  
 \*\* CONTINUING DATA \*\*\*\*\* *N/A* \*\*\*\*\*

*IV*  
 \*\* FOREIGN APPLICATIONS \*\*\*\*\* *N/A* \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY HI	SHEETS DRAWING 4	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 3
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

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## TITLE

Ergonomic vehicle control system

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